

1 Joseph N. Kravco, Jr. (*Admitted Pro Hac Vice*)
2 SPECTER SPECTER EVANS
3 & MANOGUE, P.C.
4 The 26th Floor Koppers Building
5 Pittsburgh, Pennsylvania 15219
6 Tel: (412) 642-2300
7 Fax: (412) 642-2309
8 E-mail: jnk@ssem.com

9 Michael D. Braum (167416)
10 BRAUN LAW GROUP, P.C.
11 12304 Santa Monica Blvd., Suite 109
12 Los Angeles, CA 90025
13 Tel: (310) 442-7755
14 Fax: (310) 442-7756
15 E-mail: service@braunlawgroup.com

16 Ira Spiro (67641)
17 SPIRO MOSS BARNES, LLP
18 11377 West Olympic Blvd., Fifth Floor
19 Los Angeles, CA 90064-1683
20 Tel: (310) 235-2468
21 Fax: (310) 235-2456
22 E-mail: ira@spirosmoss.com

Janet Lindner Spielberg (221926)
LAW OFFICES OF JANET
LINDNER SPIELBERG
12400 Wilshire Blvd., Suite 400
Los Angeles, CA 90025
Tel: (310) 392-8801
Fax: (310) 278-5938
E-mail: jlspielberg@jlspl.com

23 *Attorneys for Plaintiffs*

24 UNITED STATES DISTRICT COURT
25 NORTHERN DISTRICT OF CALIFORNIA
26 SAN JOSE DIVISION

27 SIDNEY SCHOLL and FELTON A.
28 SPEARS, JR., on behalf of themselves and
all others similarly situated,

Plaintiffs,

v.

WASHINGTON MUTUAL BANK, FA (aka)
WASHINGTON MUTUAL BANK); FIRST
AMERICAN EAPPRAISEIT, a Delaware
corporation; and LENDER'S SERVICE,
INC.,

Defendants.

CASE NO.: 5:08-CV-00868 (HRL)

CLASS ACTION

PLAINTIFF SIDNEY SCHOLL'S
AFFIDAVIT OF VENUE PURSUANT TO
CIVIL CODE §1780(c)

1 **TO: THE COURT, ALL PARTIES AND THEIR COUNSEL OF RECORD:**

2 I, Sidney Scholl, submit this affidavit pursuant to §1780(c) of the Consumers Legal
3 Remedies Act and declare the following:

4 I am a citizen of the State of California, residing in Sonoma County, California. In October,
5 2006, I entered a mortgage loan, which is the subject of this action, through Washington Mutual's
6 offices in Sonoma, California.

7 I hereby declare under penalty of perjury under the laws of the State of California that the
8 forgoing is true and correct.

9 Executed this 13 day of May, 2008, at SONOMA, California.

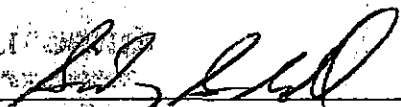
10
11 
12 _____
13 Sidney Scholl

14 - SEE ATTACHED -
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CALIFORNIA JURAT WITH AFFIANT STATEMENT

- ☒ See Attached Document (Notary to cross out lines 1-6 below)
☐ See Statement Below (Lines 1-5 to be completed only by document signer[s], *not* Notary)

0:2541 PDM


 Signature of Document Signer No 1

Signature of Document Signer No 2 (if any)

State of California

County of SONOMA

0:7541 PDM

Subscribed and sworn to (or affirmed) before me on this

13th day of May, 20 08 by
Date Month Year

(1) SIDNEY SCHALL
Name of Signer

proved to me on the basis of satisfactory evidence
 to be the person who appeared before me (.) (.)

(and

(2) _____
Name of Signer

proved to me on the basis of satisfactory evidence
 to be the person who appeared before me.)

Signature

Signature of Notary Public

Place Notary Seal Above

OPTIONAL

*Though the information below is not required by law, it may prove
 valuable to persons relying on the document and could prevent
 fraudulent removal and reattachment of this form to another document*

Further Description of Any Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

**RIGHT THUMBPRINT
 OF SIGNER #1**
 Top of thumb here

**RIGHT THUMBPRINT
 OF SIGNER #2**
 Top of thumb here